

State of Washington  
**PROJECT REVIEW COMMITTEE (PRC)**  
**GC/CM PROJECT APPLICATION**  
*To Use the General Contractor/Construction Manager (GC/CM)*  
*Alternative Contracting Procedure*

The PRC will only consider complete applications: Incomplete applications may result in delay of action on your application. Responses to Questions 1-7 and 9 should not exceed 20 pages (font size 11 or larger). Provide no more than six sketches, diagrams or drawings under Question 8.

**Identification of Applicant**

- a) Legal name of Public Body (your organization): **Public Hospital District #4, King County, WA**
- b) Mailing Address: **9801 Frontier Ave SE, Snoqualmie, WA 98065**
- c) Contact Person Name: **Renee Jensen** Title: **CEO**
- d) Phone Number: **425-831-2300** E-mail: **renej@snoqualmiehospital.org**

**1. Brief Description of Proposed Project**

- a) Name of Project: **Snoqualmie Valley Health [aka SVH] MOB/Wellness Project**
- b) County of Project Location: **King**
- c) Please describe the project in no more than two short paragraphs. *(See Example on Project Description)*  
**The Snoqualmie Valley Health MOB/Wellness Project is an addition to the existing hospital campus located in Snoqualmie WA and incorporating an 80,000 SF facility to include expanded health care related services such as: Wellness Enhancement, Pharmacy, Ambulatory Surgery, Advanced Radiology, Infusion Oncology, Birthing Center, Public Restaurant, and associated parking.**  
**The adjacency of this expansion to the existing hospital campus will be in near juxtaposition to provide ease of access for the general public as well as convenience for patients and staff for enhanced healthcare related services as well as Wellness and available retail and outdoor activities.**

- d) Applying for permission to utilize Alternative Subcontractor Selection with this application? **Yes**

**2. Projected Total Cost for the Project:**

**A. Project Budget**

Costs for Professional Services (A/E, Legal, Consultants)	<b>\$4,150,000</b>
Estimated project construction costs (including construction contingencies):	<b>\$59,400,000</b>
Equipment and furnishing costs	<b>\$4,500,000</b>
Off-site costs	<b>\$700,000</b>
Contract administration costs (owner, cm etc.)	<b>\$4,600,000</b>
Contingencies (design & owner)	<b>\$3,000,000</b>
Other related project costs: <b>Permits, DOH, Ins, Escalation</b>	<b>\$5,150,000</b>
Alternative Subcontractor Selection costs	<b>\$300,000</b>
Sales Tax	<b>\$5,167,800</b>
<b>Total</b>	<b>\$86,967,800</b>

**B. Funding Status**

Please describe the funding status for the whole project. *Note: If funding is not available, please explain how and when funding is anticipated*

**SVH is evaluating various options for funding the project including conventional direct loan opportunities and municipal revenue bonds. Meridian Property Ventures, a healthcare project development company, is a fee developer partner to SVH in the overall project.**

**3. Anticipated Project Design and Construction Schedule**

Please provide:

The anticipated project design and construction schedule, including:

- a) Procurement

- b) Hiring consultants if not already hired; and  
**Project Management and A/E consultants are on board.**
- c) Employing staff or hiring consultants to manage the project if not already employed or hired.  
**SVH staff and consultants are on board for the concept and programming phase, additional consultants will be hired as the project moves into the design and construction phases.**
- d) Provide an updated schedule to include Alternative Subcontractor Selection Procurement process.  
**See schedule below.**

Item	Task	Date
1	<b>GC/CM PCARB Application Submittal</b>	May 20, 2024
2	<b>SH PRC Presentation</b>	June 27, 2024
3	<b>GC/CM Delivery Approval</b>	June 27, 2024
4	<b>GC/CM RFQ Due</b>	July 16, 2024
5	<b>GC/CM Interviews</b>	July 25, 2024
6	<b>GC/CM RFFP-Selection</b>	Aug 5, 2024
7	<b>Schematic Design Complete</b>	Sept 5, 2024
8	<b>Alternative Subcontractor Solicitation</b>	Aug 20, 2024
9	<b>Alternative Subcontractor Selection</b>	Sept 13, 2024
10	<b>Baseline Estimate</b>	Sept 30, 2024
11	<b>GC/CM Budget - 70% DD</b>	Dec 15, 2024
12	<b>VE/Constructability</b>	Oct-Dec 2024
13	<b>Design Development Complete</b>	Jan 20, 2025
14	<b>Baseline MACC 90% Construct Docs</b>	May 5, 2025
15	<b>Construction Docs 100%</b>	June 15, 2025
16	<b>Permitting-Site/Building</b>	May-Aug 2025
17	<b>Final MACC</b>	Aug 2025
18	<b>Site Mobilization</b>	Sept 2025
19	<b>Construction Completion</b>	Dec 2026

**4. Why the GC/CM Contracting Procedure is Appropriate for this Project.**

Please provide a detailed explanation of why use of the contracting procedure is appropriate for the proposed project. Please address the following, as appropriate:

- If implementation of the project involves complex scheduling, phasing, or coordination, what are the complexities?

**The SVH Project will be built in close proximity to the existing hospital.**

**Ongoing hospital operations are essential during the course of the expansion Project.**

**The current route to the emergency department must be maintained during the course of construction.**

**Phasing the site improvements and the MOB/Wellness project is critical for both public safety as well as hospital operations.**

**Key area wetlands must be kept and protected during construction. GC/CM site planning and design coordination for maximum site utilization with economy of scale to meet scope and budget parameters is essential at the outset of concept and schematic design.**

**Site and environmental conditions will require extensive planning, maintenance, and preparation for any potential disaster response scenarios during the construction period.**

- If the project involves construction at an existing facility that must continue to operate during construction, what are the operational impacts on occupants that must be addressed?

**An occupied site and maintained facility access requires detailed planning and phasing plans to enable ongoing healthcare operations and promote safety of patients, staff, vendors, and public.**

- If involvement of the GC/CM is critical during the design phase, why is this involvement critical?

Development of phasing plans for the safety of patients and staff and to minimize the total cost of construction and disruption to daily 24/7 operations.

Involvement early in the design process to ensure materials and systems selections and project scheduling are well prepared to address seasonal weather conditions and overall schedule and facility maintenance.

Having a qualified GC/CM on board will provide accurate cost estimates throughout the duration of design and help to address the ability to recruit and capitalize on current market conditions for well qualified subcontractors.

The GC/CM will also solicit and bring on board the critical Mechanical Contractor and Electrical Contractor during the design phase for their expertise.

The new facility will have a significant presence on the campus, the GC/CM and EC/CM and MC/CM will play important roles in precon design for siting the building footprint for ease of access and efficient design of MEP infrastructure.

Design needs to allow constructability and schedule management by integrating thoughtful systems, site integration and overall jurisdictional and design team performance, all enhanced by the GC/CM on board as an integrated team member.

Design remains at a concept/Program level, ideal for the incorporation of the GC/CM experience and expertise to enhance the Schematic Design Phase.

- If the project encompasses a complex or technical work environment, what is this environment?

NA

- If the project requires specialized work on a building that has historical significance, why is the building of historical significance and what is the specialized work that must be done?

NA

- If the project is declared heavy civil and the public body elects to procure the project as heavy civil, why is the GC/CM heavy civil contracting procedure appropriate for the proposed project?

NA

## 5. Public Benefit

In addition to the above information, please provide information on how use of the GC/CM contracting procedure will serve the public interest.

- How this contracting method provides a substantial fiscal benefit; or

**The GC/CM alternative contracting method provides a significant benefit to the public entity in the surrounding geographic area in terms of delivering essential, modern, and accessible medical office building services in a schedule required for public uses at the earliest possible time. This enhanced delivery schedule is supplemented by the team of Project Manager, Architect of Record and GC/CM to completely define the project scope and costs of construction early in the design phase and the ability to select prime subcontractors based on a competitive and qualified bid response.**

**Mechanical and Electrical Contractors [MC/CM and EC/CM] will also be brought on board during the early design phase for essential precon services related to materials selection and constructability review as well as BIM modeling.**

- How the use of the traditional method of awarding contracts in a lump sum is not practical for meeting desired quality standards or delivery schedules.

**In summary the GC/CM will provide the Project the following benefits as compared to the traditional DBB method of contract delivery:**

**Scope review and constructability analysis from the GC/CM and MC/CM and EC/CM during the design phase.**

**Design details reviewed by the GC/CM team; unknowns are mitigated.**

**Cost and budget information is updated at the DD phase of design.**

**Early establishment of a MACC for financing control.**

**Public Agency funding budget control will be established at the outset of early schematic design estimates prepared by the GC/CM team tracked and updated throughout the design phase to the implementation of the MACC GMP contract value.**

**GC/CM is selected on a basis of qualifications and not simply a low lump sum bid.**

- In the case of heavy civil GC/CM, why does the heavy civil contracting procedure serves the public interest.

**NA**

## **6. Public Body Qualifications**

Please provide:

- A description of your organization's qualifications to use the GC/CM contracting procedure.

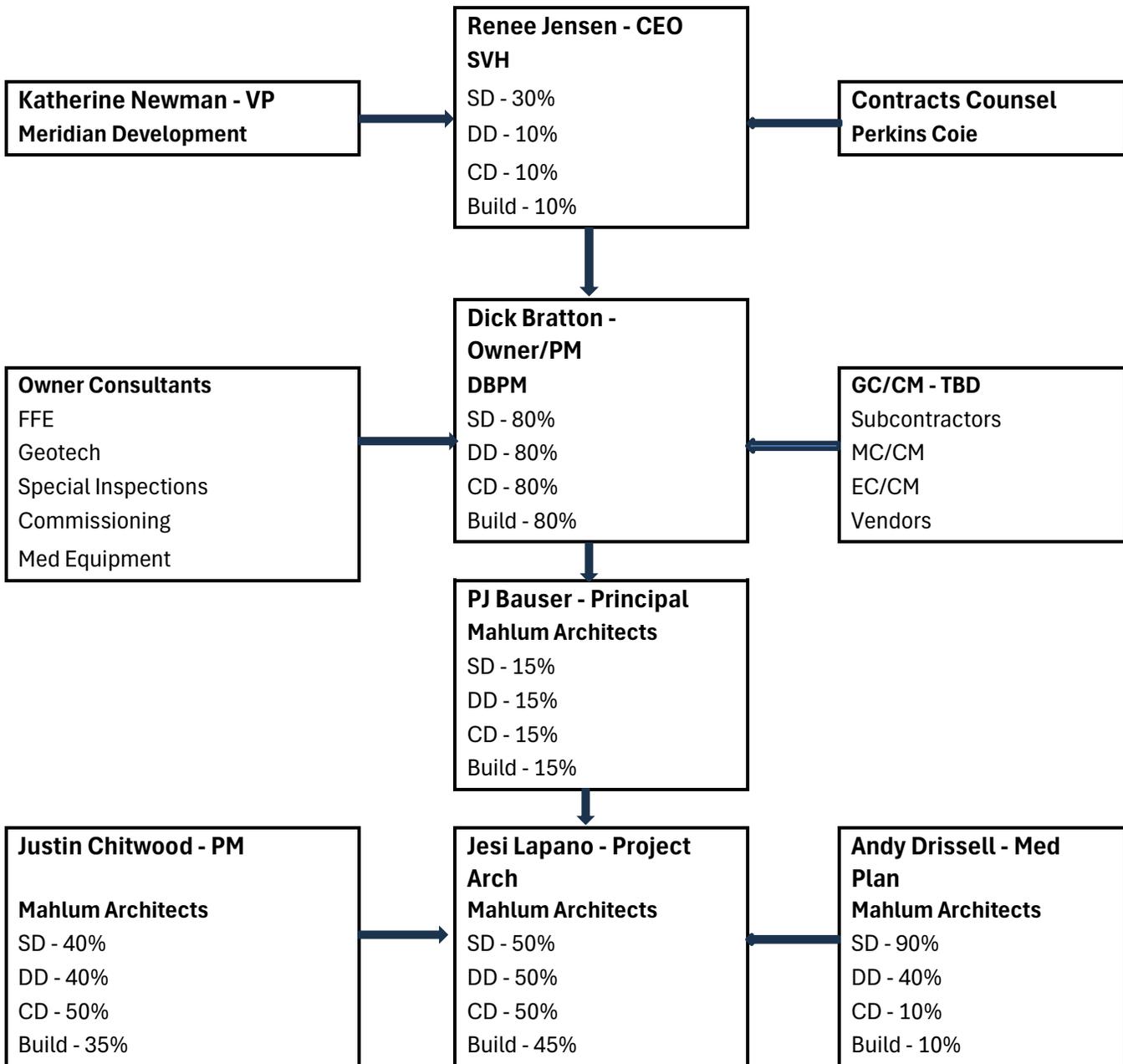
**Representing Snoqualmie Valley Health [SVH] are CEO Renee Jensen and Dick Bratton Project Management [DBPM]. Both have worked methodically together for several years and developed numerous successful key projects including Summit Pacific Medical Center Critical Access Hospital, The McCleary Clinic, and Summit Pacific Medical Center Wellness Center which is a GC/CM delivered project.**

**In addition, Danny Scott, SVH Facility Manager, was also the Facility Manager for the Summit Pacific Medical Center referenced above.**

**The A/E team of Mahlum Architects as Architect of Record is providing the ASMEP design for the SVH Project and is also currently performing as AOR for the Summit Pacific Medical Center \$50M expansion project now under construction and managed by Dick Bratton.**

**The above team will provide the applicant [SVH] with a proven level of project management expertise and understanding of the GC/CM process that will benefit the public district with exemplary results in terms of overall strategic planning. design control, cost and schedule control and QA/QC management.**

- A **Project** organizational chart, showing all existing or planned staff and consultant roles. **See below.**



- Staff and consultant short biographies.

See below.

**Dick Bratton Project Management [DBPM]**

**SPMC-Owner Rep/PM**

DBPM was established in 2003 for the expressed purpose of providing building Owners specific Owner Representation and Construction Management for the successful development and completion of projects in the construction community throughout the western US. Mr. Bratton’s past experience includes a combination of General Contracting, Construction Management and Project Management, with experience in the health care, commercial, retail, industrial and institutional sectors of the building industry over the past 40+ years. Notable projects include commercial headquarters, large stand-alone health care MOBs, and developments, green field hospitals and hotels, retail malls and centers, multifamily new and renovation developments. The majority of Mr. Bratton’s project management has been for Design Build and Construction Management at Risk project delivery methods over the past twenty years. Mr. Bratton completed

the June 2016 GC/CM workshop conducted by the AGC Education Foundation and has provided this expertise in managing the selection of the GC/CM firm, directorial of the integrated design process and supervising the construction for numerous recently completed healthcare facilities utilizing the GC/CM alternative delivery under the guidelines of RCW 39.10.

### **PJ Bauser AIA LEED AP, Mahlum Architects**

#### **Principal**

PJ is one of Mahlum's healthcare leaders, and brings a deep knowledge of healthcare design principles and a passion for affecting population health through, thoughtful design of the built environment. His organizational leadership, facilitation skills and deep understanding of both clinical and construction delivery methods will lead a design team intent on delivering transformational projects to SPMC.

#### **EDUCATION & REGISTRATIONS**

PJ holds a Bachelor of Science in Architecture and Master of Architecture from the University of Cincinnati College of Design, Art, Architecture. He is a registered architect in Washington. He is a LEED Accredited Professional.

### **Justin Chitwood AIA, Mahlum Architects**

#### **Project Manager**

Justin has 8 years of experience working in healthcare design, including planning, construction documentation, project management, and construction administration. He believes that great projects are the result of great communication and clear goals, and enjoys working closely with his clients, A/E team, and contractors to deliver successful projects.

#### **EDUCATION & REGISTRATIONS**

Justin holds a Master of Architecture from the University of Pennsylvania and a Bachelor of Science from the University of Texas at Arlington. He is a registered architect in Washington and California.

### **Jesi Lapano, AIA, Mahlum Architects**

#### **Project Architect**

JESSI has over 11 years of architectural experience and is passionate about designing with healthy materials to support occupant wellness. She is a leader in our healthcare market, focusing on design clarity and delivering the greatest patient experience by balancing budgets and constructability challenges. Committed to delivering on Mahlum's vision, Jessi advocates for high sustainability standards in her work.

#### **EDUCATION & REGISTRATIONS**

Jessi received her Master of Architecture from Rensselaer Polytechnic Institute and her Bachelor of Arts from the University of Pittsburgh. She is a registered Architect in the State of Washington.

### **Andy Drissell, AIA LEED AP BD+C, Mahlum Architects**

#### **Medical Planner**

ANDY brings 12 years of experience across a broad range of medical projects, with particular expertise in design, medical planning and project coordination with all stakeholders, from project initiation through completion. He is passionate about patient-centered design and the unique role architecture plays in creating spaces that promote healing and well-being. Andy has recently been involved with the new Dialysis Clinics for Northwest Kidney Centers and the Klickitat Valley Health Hospital Addition.

#### **EDUCATION & REGISTRATIONS**

Andy received his Master of Architecture from the University of Kansas. He is a

registered architect in Washington, is EDAC Accredited, and is a LEED Accredited Professional. Andy is currently pursuing WELL Certification.

- Provide the ***experience and role on previous GC/CM projects delivered*** under RCW 39.10 or equivalent experience for each staff member or consultant in key positions on the proposed project. **See below.**

Firm: Dick Bratton Project Management – Owner Rep/PM					Role During Project Phases		
Name	Summary of Experience	Project Names	Project Size	Type	Planning	Design	Construct
1.Dick Bratton	Owner of Dick Bratton Project Management LLC specializing in GC/CM Healthcare Projects	Summit Pacific Medical Center Wellness Center Elma, WA	\$30M	GC/CM RCW 39.10	PM PIC	PM PIC	PM PIC
		Lake Chelan Hospital Chelan, WA	\$45M	GC/CM RCW 39.10	PM PIC	PM PIC	PM PIC
		Klickitat Valley Health Goldendale, WA	\$19M	GC/CM RCW 39.10	PM lead	PM Lead	Pending
		Skyline Hospital, White Salmon, WA	\$5M	GC/CM RCW 39.10	PM PIC	PM PIC	PM PIC
		Samaritan Hospital, Moses Lake, WA	\$130M	GC/CM RCW 39.10	PM	PM Advisory	
		St Joseph's Hospital, CA	\$45M	GC/CM	PM PIC	PM PIC	PM PIC
		Summit Pacific Medical Center Hospital, Elma, WA	\$20M	DBB	PM	PM	PM
		DOE Headquarters, Lacey	\$40M	D/B	CM	CM	CM
		Lincoln Square, Bellevue	\$400M	GC/CM	PIC	PIC	PIC
Firm: Mahlum Architects – Architect of Record					Role During Project Phases		
Name	Summary of Experience	Project Names	Project Size	Type	Planning	Design	Construct
1.PJ Bauser	Principal	UWMC Montlake Surgery Expansion	\$12.7	P D/B			
		Summit Pacific Medical Center Wellness Center Elma, WA	\$40M	GC/CM	PIC	PIC	PIC
		NKC Seattle at Yesler Terrace Seattle, WA	\$36.7M	GC/CM	PIC	PIC	PIC
		NKC Rainier Beach Clinic Seattle, WA	\$7.2M	GC/CM	PM	PM	PM
		NKC Bellevue Clinic Bellevue, WA	\$5.1M	GC/CM	PM, Principal	PM, Principal	PM, Principal
		NKC Port Angeles Clinic Port Angeles, WA	\$6.1M	D/B	PM, Principal	PM, Principal	PM, Principal
		NKC Panther Lake Clinic Kent, WA	\$6.8M	D/B	PM	PM	PM
		Harborview PACU Expansion University of Washington Medical Center, Seattle, WA	\$380k	D/B/B	PM/PA	PM/PA	PM/PA
		7SE Oncology Unit Renovation University of Washington Medical Center, Seattle, WA	\$1.2M	DBB	PM	PM	PM
		6NN Transfusion Lab University of Washington Medical Center, Seattle, WA	\$1.9M	D/B/B	A/PM	A/PM	A/PM
		NKC Burien Campus (Clinic, Admin, Logistics)	\$29M	GC/CM	PM	PM	PM
		Pediatric Emergency Department Sacred Heart Medical Center, Spokane, WA	\$12M	GC/CM	A	A	A
		Asante 2West and 6Tower Remodels	2W: \$7M 6T: \$2M	GC/CM	PM	PM	PM
		Providence Medical Park Spokane Valley Providence Sacred Heart Medical Center	\$29.5M	GC/CM	A	A	A
		Cardiac Intensive Care Unit Renovation & Expansion Providence Sacred Heart Medical Center, Spokane, WA	\$11.1M	GC/CM	A	A	A

		Peace Island Medical Center, Friday Harbor, WA	\$17.6M	GC/CM	A	A	A
		Samaritan, Sweet Home MOB, Sweet Home, OR	\$10.6M	GC/CM	Principal	Principal	Principal
		Klickitat Valley Health Goldendale, WA	\$19M	GC/CM RCW 39.10			
<b>2. Jessi Lapano</b>	Project Architect	NKC Seattle at Yesler Terrace Seattle, WA	\$36.7M	GC/CM	PA	PA	PA
	Project Architect	NKC Kirkland Kirkland, WA	\$2.35M	GC/CM	PA	PA	PA
	Project Architect	NKC SeaTac SeaTac, WA	\$1.1M	GC/CM	PA	PA	PA
	Project Architect	NKC Panther Lake Kent, WA	\$6.4M	D/B	N/A	PA	PA
	Design Staff	Orcas Island 2017 Bond Works	\$9.1M	DBB	DS	DS	DS
	Design Staff	Viewlands Elementary School	\$58.7M	DBB	PA	PA	
	Design Staff	Firgrove Elementary School Puyallup, WA	\$31M	DBB	DS	DS	
	Design Staff	Madrona School, Edmonds, WA	\$36.2M	GC/CM	DS	DS	
<b>3. Justin Chitwood</b>	Project Manager	UWMC Montlake Surgery Expansion	\$12.7M	P D/B	PM	PM	PM
	Project Manager	Summit Pacific Medical Center Wellness Center Elma, WA	\$40M	GC/CM	PM	PM	PM
	Architect, Project Manager	Kaiser Permanente Blood Bank & Clinical Lab. Santa Rosa, CA	\$500K	GC/CM	PA/PM	PA/PM	PM
	Architect, Project Manager	Highland Hospital Cath Lab, Oakland, CA	\$400K	DBB	PA/PM	PM	PM
	Architect, Project Manager	Kaiser Permanente PACU & Imaging Department Renovation	\$2M	GC/CM	PA/PM	PA/PM	PM
	Project Manager	Kaiser Permanente OR AHU Replacements, Santa Clara, CA	\$5M	GC/CM	PA/PM	PM	
	Architect, Project Manager	Kaiser Permanente Sleep Services, Santa Rosa, CA	\$1.5	GC/CM	PA/PM	PA/PM	PM
	Project Manager	UCSF Imaging Department Upgrade, San Francisco, CA	\$1.4M	DBB	PM		
	Architect, Project Manager	Kaiser Permanente Adult Family Medicine Relocation, Santa Rosa, CA	\$900K	GC/CM	PA/PM	PA/PM	PM
	Project Manager	Kaiser Permanente Chronic Conditions Management, Santa Rosa, CA	\$1.5M	GC/CM	PM	PM	PM
	Project Manager	Kaiser Permanente Pharmacy Remodel, Petaluma, CA	\$850k	GC/CM	PM	PM	PM
	Project Manager	VA Palo Alto Cath Labs, Palo Alto, CA	\$12M	DBB			PM
	Architect	VA Mather Medical Specialties, Mather, CA	\$7.2M	DBB		A	A
	Architect	VA Palo Alto Translational, Palo Alto, CA	\$9.3M	DBB	A	A	
<b>4. Andy Drissell</b>	Designer / Medical Planner						
	Medical Planner, Project Architect	UWMC Montlake Surgery Expansion	\$12.7M	P D/B	Lead MP / Lead PA	Lead MP / Lead PA	Lead MP / Lead PA
	Designer, Medical Planner, Project Architect	Summit Pacific Medical Center Wellness Center Elma, WA	\$40M	GC/CM	Lead Design/MP	Lead Design/MP	
	Medical Planner, Project Architect	Klickitat Valley Health Goldendale, WA	\$19M	GC/CM RCW 39.10	Lead MP / Lead PA	Lead MP / Lead PA	

	Medical Planner, Project Architect	NKC Seattle Clinic (Flagship) Seattle, WA	\$36.7M	GC/CM	Lead MP / Lead PA	Lead MP / Lead PA	
	Medical Planner, Project Architect	NKC Everett Clinic Everett, WA	\$2.6M	GC/CM	Lead MP / Lead PA	Lead MP / Lead PA	Lead MP / Lead PA
	Medical Planner, Project Architect	NKC Bellevue Clinic Bellevue, WA	\$5.1M	GC/CM	Lead MP / Lead PA	Lead MP / Lead PA	Lead MP / Lead PA
	Medical Planner, Project Architect	NKC Rainier Beach Clinic Seattle, WA	\$7.2M	GC/CM	Lead MP / Lead PA	Lead MP / Lead PA	Lead MP / Lead PA
	Medical Planner, Project Architect	NKC Port Angeles Clinic Port Angeles, WA	\$6.1M	D/B	Lead MP / Lead PA	Lead MP / Lead PA	
	Medical Planner, Project Architect	NKC Panther Lake Clinic Kent, WA	\$6.8M	D/B	Lead MP / Lead PA	Lead MP / Lead PA	
	Medical Planner, Project Architect	NKC Burien Campus (Clinic, Admin, Logistics)	\$29M	GC/CM	Lead MP / Lead PA	Lead MP / Lead PA	
	Architect	OHSU 7C Medical Surgery Remodel	\$4.2M	IPD		A	
	Architect	OHSU Emma Jones Hall Family Medicine Renovation	\$200k	IPD	A	A	
	Architect	Asante Heimann Cancer Center	\$42.6M	D/B	A	A	
	Architect	Asante TRCH Cancer Center Linear Accelerator Renovation	\$1.2M	GC/CM		A	
	Architect	Asante 3 East Behavioral Health Unit Renovation	\$6.1M	GC/CM		A	
	Architect	Asante 2West and 6Tower Remodels	2W: \$7M 6T: \$2M	GC/CM		A	
	Architect	Kaiser Rockwood Mental Health Clinic	\$1M	GC/CM	A	A	
	Architect	Kaiser Amberglen Headquarters Remodel	\$3.4M	GC/CM	A	A	
	Project Architect	Telluride New Medical Center	\$24M	DBB	Lead PA	Lead PA	
	Architect	Centre Hospitalier de l'Université de Montréal	\$1.5B	IPD, P3		A	A

- The qualifications of the existing or planned project manager and consultants.

**As noted in the experience table provide in the previous bullet point request for response Dick Bratton and the Mahlum Architects team are significantly well qualified in health care design and construction projects of similar scope and magnitude of the proposed SVH MOB/Wellness Project and are currently working in collaboration on a \$50M GC/CM project under construction for Summit Pacific Medical Center.**

- If the project manager is interim until your organization has employed staff or hired a consultant as the project manager, indicate whether sufficient funds are available for this purpose and how long it is anticipated the interim project manager will serve.

**NA**

- A brief summary of the construction experience of your organization's project management team that is relevant to the project.
- **As noted in the experience table provide in the previous bullet point request for response Dick Bratton and the Mahlum Architects team are significantly well qualified in health care design and construction projects of similar scope and magnitude of the proposed SVH MOB/Wellness Project and are currently working in collaboration on a \$50M GC/CM project under construction for Summit Pacific Medical Center.**
- A description of the controls your organization will have in place to ensure that the project is adequately managed.

**See below chart.**

**The SVH MOB/Wellness Project team comprised of Dick Bratton, Mahlum Architects, and Perkins Coie are all proven experts in developing and implementing project controls and procedures to guide the project to a successful and timely completion. A specific project plan task matrix will be drafted to outline critical project team responsibilities and procedures for budget, schedule and change of work controls.**

Project budgets, schedules and VE in progress will be established and updated throughout the design phases. Each phase of design will be reviewed for scope and budget and will be approved by SVH before moving into the next design phase. Contingencies will be comprised of both statute driven contractor contingencies and Owner contingencies to provide budget cushion beyond the MACC allowance provided in the GC/CM contract.

Once construction has commenced the work will be documented daily by the project management team and weekly OAC meetings held on site to review and facilitate the progress of the work. The GC/CM will be held accountable to provide Owner approved safety and QA/QC strategic plans as well as project reporting provision for documentation. Schedules will be tracked on a weekly basis and budget updates will be required monthly. On-site inspections conducted by SVH project management will be documented on a daily basis.

The table below provides a perspective of the team roles related to the GC/CM selection and implementation process.

	Task	SVH Owner	Owner PM	GC/CM	A/E, Legal
Key to Abbreviations: A=Approve L=Lead R=Review S=Support					
1	Application to PRC	A	R		S
2	Draft GC/CM Contract	A	L		S
3	GC/CM RFQ development	A	R		S
4	GC/CM Selection procedures	A	R		S
5	OAC Conduct Site Visit	S	L		S
6	GC/CM Selection Phase 1 RFP/RFQ	S	L		S
7	GC/CM Selection Phase 2 Interviews	S	L		S
8	GC/CM Selection Phase 3 RFFP	S	L		S
9	Final Proposals for FEE/Specified GCs	A	L		S
10	Preconstruction Work Plan/Agreement	A	L	R	S
11	Consultation During Precon	S	L	R	S
12	MEP Selection [if elected and eligible]	A	R	L	S
13	Subcontract Plan	A	R	L	S
14	Subcontractor Buyout	A	R	L	S
15	MACC Negotiations and GC/CM Contract	A	L	R	S
16	SH Approval MACC	A	L	R	S
17	Construction - Completion	A	A	L	S

- Brief description of your planned GC/CM procurement process.

SVH will contract for GC/CM services in accordance with the proceed outlined by RCW 39.10.210 through 39.10.410. The RFQ will be advertised in various local publications as well as the DJC and will require responses based on a select set of criteria and consistent with RCW 39.10. A mandatory informational meeting will be held and RFQs submitted for SVH review and scoring. Notification of the most qualified firms will be extended for subsequent in person interviews. Then a shortlist of firms will be issued the final RFFP. Selection of the GC/CM firm will be based on the highest total score with scoring tabulated in three phases of GC/CM evaluation: Qualifications Submittal, Interview and Cost Proposal Closed Bid for Fee and General/Special Conditions.

The selected firm will be required to enter into a GC/CM contract agreement based on the AIA A133 GC/CM Owner Agreement with modified AIA 201 General Conditions.

- Verification that your organization has already developed (or provide your plan to develop) specific GC/CM or heavy civil GC/CM contract terms.

The above-mentioned contract terms are in final development and will be issued within the RFFP solicitation.

**7. Public Body (your organization) Construction History:**

Provide a matrix summary of your organization’s construction activity for the past six years outlining project data in content and format per the attached sample provided:

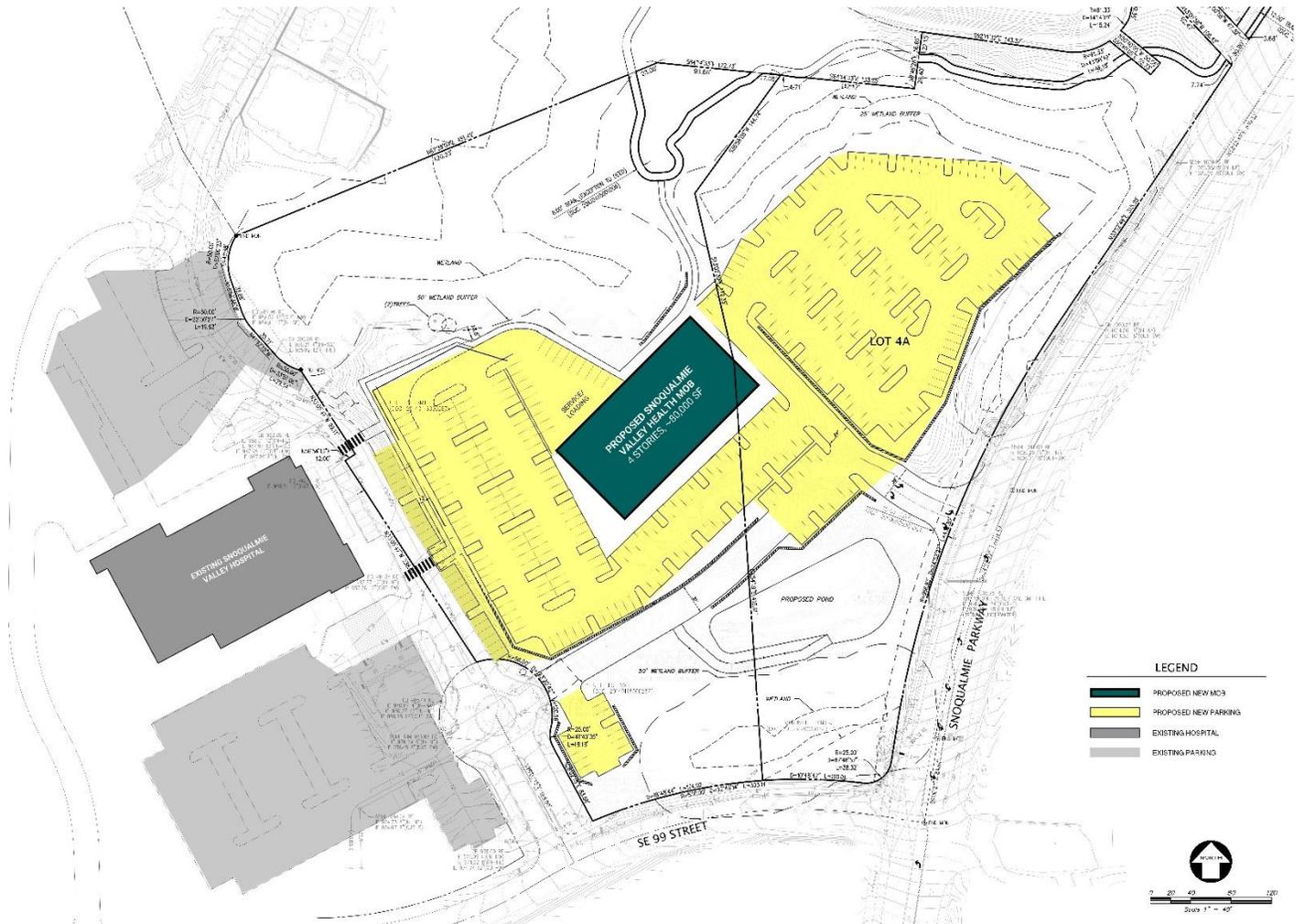
See below chart.

Project Name	Description	Contracting Method Design Bid Build (DBB)	Planned Start	Planned Finish	Actual Start	Actual Finish	Planned Budget	Actual Budget	Reason for Budget or Schedule overrun
Walk In Clinic	4,000 SF Clinic Remodel and X-Ray Area Add	DBB	8/2021	12/2021	8/2021	12/2021	\$500K	\$550K	Owner Elected Adds
Treatment Room Conversion	Corridor and Room convert to Patient Treatment	DBB	9/2020	10/2020	9/2020	10/2020	\$200K	\$200K	On budget/on schedule
Drive Through Testing	Build Drive Through COVID Testing Area	DBB	10/2020	11/2020	10/2020	11/2020	\$54K	\$54K	On budget/on schedule

**8. Preliminary Concepts, sketches or plans depicting the project.**

To assist the PRC with understanding your proposed project, please provide a combination of up to six concepts, drawings, sketches, diagrams, or plan/section documents which best depict your project. In electronic submissions these documents must be provided in a PDF or JPEG format for easy distribution.

**As attached below, site plans are in concept currently, to be further developed and scope confirmed once the GC/CM is selected and on board.**



**9. Resolution of Audit Findings on Previous Public Works Projects**

If your organization had audit findings on **any** project identified in your response to Question 7, please specify the project, briefly state those findings, and describe how your organization resolved them.  
**None.**

**10. Subcontractor Outreach**

Please describe your subcontractor outreach and how the public body will encourage small-, minority-, women-, and veteran-owned business participation.

**The GC/CM will work with SVH during the preconstruction phase to identify specific MWBE and DBE opportunities to meet goals and requirements. The GC/CM will be requested to develop a subcontracting plan that establishes the MWBE, DBE and apprenticeship utilization goals. NADBE, NAME and WA State Office of Minority and Women’s Business Enterprises [OMWBE] will be contacted for listings of eligible firms. Outreach efforts will continue throughout the bidding process to solicit competitive bidding and strive to meet recommended % goals for M/WBE and DBE participation which will be outlined in the instructions for GC/CM RFQ which would be reasonable and representative of the specific geographic area of Snoqualmie and Western WA. SVH also maintains a small works roster as an information resource during the GC/CM bidding sequence. Outreach efforts shall include:**

- **Informational meetings prior to bidding to generate interest among the MWBE, DBE, and all local trade partners.**
- **Issue advanced notice to include bidding timelines and critical dates.**
- **Develop bid packages aligned with the capabilities of local and regional MWBE and DBE firms.**
- **Thoroughly advertise the project and make available access to all documents.**
- **Conduct Town Hall opportunities for informational project presentations and community involvement.**

**11. Alternative Subcontractor Selection**

- If your organization anticipates using this method of subcontractor selection and the scope of work is anticipated to be over \$3M, please provide a completed *Supplement A, Alternative Subcontractor Selection Application* document, one per each desired subcontractor/subcontract package.  
**See attached Supplement A for both MC and EC.**
- If applicability of this method will be determined after the project has been approved for GC/CM alternative contracting or your project is anticipated to be under \$3M, respond with **N/A** to this question.  
**NA**
- If your organization in conjunction with the GC/CM decide to use the alternative subcontractor method in the future and your project is anticipated to be over \$3M, you will then complete the *Supplement B Alternative Subcontractor Selection Application* and submit it to the PRC for consideration at a future meeting.  
**NA**

**CAUTION TO APPLICANTS**

The definition of the project is at the applicant's discretion. The entire project, including all components, must meet the criteria to be approved.

**SIGNATURE OF AUTHORIZED REPRESENTATIVE**

In submitting this application, you, as the authorized representative of your organization, understand that: (1) the PRC may request additional information about your organization, its construction history, and the proposed project; and (2) your organization is required to submit information requested by the PRC. You agree to submit this information in a timely manner and understand that failure to do so may delay action on your application.

If the PRC approves your request to use the GC/CM contracting procedure, you also agree to provide additional information if requested. For each GC/CM project, documentation supporting compliance with the limitations on the GC/CM self-performed work will be required. This information may include but is not limited to: a construction management and contracting plan, final subcontracting plan and/or a final TCC/MACC summary with subcontract awards, or similar.

I have carefully reviewed the information provided and attest that this is a complete, correct and true application.

Signature: 

Name: **Renee Jensen** (*public body personnel*)

Title: **CEO**

Date: **May 15, 2024**

State of Washington  
**PROJECT REVIEW COMMITTEE (PRC)**

**SUPPLEMENT A**

**ALTERNATIVE SUBCONTRACTOR SELECTION APPLICATION**

*To use the General Contractor/Construction Manager (GC/CM) Alternative Subcontractor Selection per RCW 39.10.385 as approved by the Legislature in the spring of 2021.*

Please submit one Supplement A form for each desired subcontractor/subcontract package as part of your Project Application.

**Identification of Applicant**

- a) Legal name of Public Body (your organization): **Snoqualmie Valley Health [SVH]**
- b) Address: **9801 Frontier Ave SE, Snoqualmie, WA 98065**
- c) Contact Person Name: **Renee Jensen** Title: **CEO**
- d) Phone Number: **425-831-2300** E-mail: **rjensen@snoqualmiehospital.org**
- e) Name of Project: **SVH MOB/Wellness**
- f) Subcontractor/Subcontract Package desired for Alternative Selection: **Mechanical**
- g) Subcontract Value: **\$12,000,000**

**1. Public Benefit –**

- a. What does your organization see as the benefits to the public of using alternative subcontractor selection and why is it appropriate vs low bid selection?

**The MC/CM contractor on board during the design phase will provide substantial benefits to the project versus bidding the mechanical scope of work upon completion of design including:**

- **Assessment of current hospital mechanical systems during the critical design development phase**
- **Value engineering opportunities for selected mechanical systems components**
- **Reduction of change orders due to unclear or undefined scope of work**
- **Work with the GC/CM, and the design team AOR and EOR and SVH for phasing strategy during construction to maintain the critical occupancy and use of the existing ED department.**
- **Early recommendation of specific materials and equipment selections that could be affected in schedule control if bid at the completion of design due to the ongoing supply chain issues in the construction industry.**
- **Selection of the mechanical subcontractor will be based on qualifications and past experience rather than solely based on low bid.**

- b. Please explain the process your organization will use to determine if alternative subcontractor selection is in the best interest of the public.

**SVH, Mahlum Architects [AOR], PAE Engineers [EOR], collectively agree that the selection of the mechanical contractor during the design phase as an integrated team member and based on qualifications and experience will provide exceptional benefit to the project design, cost, and schedule. The risk of bidding on the mechanical scope of the project upon completion of design is not in the best interest of the community of stakeholders involved in this challenging project. Keeping the existing ED operating during construction is essential, the coordination with the GC/CM and the selected MC/CM will provide SVH and the community that assurance.**

- c. Please provide an updated schedule to include Alternative Subcontractor Selection Procurement process.
- d.

State of Washington  
**PROJECT REVIEW COMMITTEE (PRC)**

**SUPPLEMENT A**

Item	Task	Date
1	GC/CM PCARB Application Submittal	May 20, 2024
2	SH PRC Presentation	June 27, 2024
3	GC/CM Delivery Approval	June 27, 2024
4	GC/CM RFQ Due	July 16, 2024
5	GC/CM Interviews	July 25, 2024
6	GC/CM RFFP-Selection	Aug 5, 2024
7	Schematic Design Complete	Sept 5, 2024
8	Alternative Subcontractor Solicitation-MC/CM	Aug 20, 2024
9	Alternative Subcontractor Selection	Sept 13, 2024
10	Baseline Estimate	Sept 30, 2024
11	GC/CM Budget - 70% DD	Dec 15, 2024
12	VE/Constructability	Oct-Dec 2024
13	Design Development Complete	Jan 20, 2025
14	Baseline MACC 90% Construct Docs	May 5, 2025
15	Construction Docs 100%	June 15, 2025
16	Permitting-Site/Building	May-Aug 2025
17	Final MACC	Aug 2025
18	Site Mobilization	Sept 2025
19	Construction Completion	Nov 2026

**2. Public Body Engagement/Knowledge**

- a. What role will your organization play in the selection process and the oversight of the GC/CM in the selection process?

**SVH will organize, administer, and completed the three-step selection process for the GC/CM and would participate in working with the GC/CM, in developing and reviewing the solicitation materials for the selection of the MC/CM and in accordance with the criteria set forth in RCW 39.10.385. The design team of Mahlum Architects and PAE Engineers will also participate if the solicitation and selection process.**

- b. Discuss your organization's understanding of the Public Body responsibilities contained in RCW 39.10.385, including the audit requirements.

**As the GC/CM will lead the alternative subcontractor selection process SVH will provide oversight, analysis, assistance, and approvals during the selection process and in accordance with the criteria set forth in RCW 39.10.385**

**SVH will:**

- **Authorize the GC/CM to proceed with the alternative subcontractor selection process.**
- **Ensure that the selection process is in the best interest of the public and the community.**
- **Participate in the review of the subcontractor qualifications.**
- **Respond to any written protests related to the selection of the most qualified subcontractor.**

State of Washington  
**PROJECT REVIEW COMMITTEE (PRC)**

**SUPPLEMENT A**

- **Work with the GC/CM in the coordination and review of submitted cost proposals and preconstruction fees associated with the selected firm, and determine that the submittals are reasonable, fair and within industry standards and the project budget.**
- **Approve the GC/CM to contract with the selected firm for Preconstruction Services.**
- **Upon time of the MACC review and approve the MACC for the subcontractor.**
- **Provide a third-party audit to confirm the proper accrual of subcontractor costs.**

**SIGNATURE OF AUTHORIZED REPRESENTATIVE**

In submitting this application, you, as the authorized representative of your organization, understand that: (1) the PRC may request additional information about your organization, its construction history, and the proposed project; and (2) your organization is required to submit the information requested by the PRC. You agree to submit this information in a timely manner and understand that failure to do so may delay action on your application.

I have carefully reviewed the information provided and attest that this is a complete, correct and true application.

Signature: \_\_\_\_\_



Name: **Renee Jensen** (*public body personnel*)

Title: **CEO**

Date: **May 15, 2024**

State of Washington  
**PROJECT REVIEW COMMITTEE (PRC)**

**SUPPLEMENT A**

**ALTERNATIVE SUBCONTRACTOR SELECTION APPLICATION**

*To use the General Contractor/Construction Manager (GC/CM) Alternative Subcontractor Selection per RCW 39.10.385 as approved by the Legislature in the spring of 2021.*

Please submit one Supplement A form for each desired subcontractor/subcontract package as part of your Project Application.

**Identification of Applicant**

- a) Legal name of Public Body (your organization): **Snoqualmie Valley Health[SVH]**
- b) Address: **9801 Frontier Ave SE, Snoqualmie, WA 98065**
- c) Contact Person Name: **Renee Jensen** Title: **CEO**
- d) Phone Number: **425-831-2300** E-mail: **rjensen@snoqualmiehospital.org**
- e) Name of Project: **SVH MOB/Wellness**
- f) Subcontractor/Subcontract Package desired for Alternative Selection: **Electrical**
- g) Subcontract Value: **\$11,400,000**

**1. Public Benefit –**

- a. What does your organization see as the benefits to the public of using alternative subcontractor selection and why is it appropriate vs low bid selection?

**The EC/CM contractor on board during the design phase will provide substantial benefits to the project versus bidding the electrical scope of work upon completion of design including:**

- **Assessment of current hospital electrical systems during the critical design development phase**
- **Value engineering opportunities for selected electrical systems components**
- **Reduction of change orders due to unclear or undefined scope of work**
- **Work with the GC/CM, and the design team AOR and EOR and SVC for phasing strategy during construction to maintain the critical occupancy and use of the existing ED department.**
- **Early recommendation of specific materials and equipment selections that could be affected in schedule control if bid at the completion of design due to the ongoing supply chain issues in the construction industry.**
- **Selection of the electrical subcontractor will be based on qualifications and past experience rather than solely based on low bid.**

- b. Please explain the process your organization will use to determine if alternative subcontractor selection is in the best interest of the public.
- 2. SVH, Mahlum Architects [AOR], PAE Engineers [EOR], collectively agree that the selection of the electrical contractor during the design phase as an integrated team member and based on qualifications and experience will provide exceptional benefit to the project design, cost, and schedule. The risk of bidding on the electrical scope of the project upon completion of design is not in the best interest of the community of stakeholders involved in this challenging project.**
- a. Please provide an updated schedule to include Alternative Subcontractor Selection Procurement process.

State of Washington  
**PROJECT REVIEW COMMITTEE (PRC)**

**SUPPLEMENT A**

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19	Construction Completion	Nov 2026

**3. Public Body Engagement/Knowledge**

- a. What role will your organization play in the selection process and the oversight of the GC/CM in the selection process?

**SVH will organize, administer, the three-step selection process for the GC/CM and would participate in working with the selected GC/CM, in developing and reviewing the solicitation materials for the selection of the EC/CM and in accordance with the criteria set forth in RCW 39.10.385. The design team of Mahlum Architects and PAE Engineers will also participate if the solicitation and selection process.**

- b. Discuss your organization’s understanding of the Public Body responsibilities contained in RCW 39.10.385, including the audit requirements.

**As the GC/CM will lead the alternative subcontractor selection process SVC will provide oversight, analysis, assistance, and approvals during the selection process and in accordance with the criteria set forth in RCW 39.10.385**

**SVC will:**

- **Authorize the GC/CM to proceed with the alternative subcontractor selection process.**
- **Ensure that the selection process is in the best interest of the public and the community.**
- **Participate in the review of the subcontractor qualifications.**
- **Respond to any written protests related to the selection of the most qualified subcontractor.**

State of Washington  
**PROJECT REVIEW COMMITTEE (PRC)**

**SUPPLEMENT A**

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I have carefully reviewed the information provided and attest that this is a complete, correct and true application.

Signature:  \_\_\_\_\_

Name: **Renee Jensen** (*public body personnel*)

Title: **CEO**

Date: **May 15, 2024**